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# Her Son, His Mom

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## Her Son, His Mom

Many immigrant families struggle to disclose their health, often masking shame with modesty. A few months ago in a community health clinic, my attending physician brought a middle-aged man back into our room. I was expecting a seventy year old woman as our next patient. Instead, it was her son. He wanted to discuss some things with us before we saw her. She only spoke Arabic. He only spoke English. He had an appointment as well, but he wanted us to see his mother first so that he could take her home before we discussed his health. He did not want his mother to learn that he was HIV positive.

My attending physician emphasized that we would not disclose this information, and the son smiled innocently saying it was for the best that his mother not know. Understandably, he was worried it would affect their relationship. We validated his concern, and we promised to respect it. He opened the door for his mother who was outside waiting. I was to be her translator. Her complaint was difficulty walking for the past two weeks. Even though she had not seen her son for the past twenty years, she immigrated from Egypt to live with him. He knew she had diabetes like him and was worried she had developed peripheral neuropathy in her feet.

He asked me why she had to take more medications than he did. He picked a box out of her purse which had a note on it that was handwritten in Arabic. I read it slowly, added some vowels, and changed b's to p's to get pramipexole. Confused, I turned to her and asked why she was prescribed this medication. She hesitated and said it was for her fingers. I wondered to myself whether she meant that she was on the medication for her hand tremors? I looked at her son then back at her. I sifted through the other boxes of medication myself. All medications to treat symptoms of the same condition: Parkinson's disease. My tone shifted as I asked if she knew what she had.

Still smiling, she said yes and added "khalas" which can mean "enough" when one wants to change the subject. I asked if he knew. She said no. I asked who gave her the medications, and she said "a brain doctor". Her son was confused. I had stopped translating for him. He asked me what medications she was taking and their indications. I looked at her again seeking permission in her silent smile. She said she was hoping not to worry him. I asked her what the doctors had mentioned as far as a prognosis. She said there was nothing else they could do.

She was given six months of medications and spent her savings to move here to live in the company of her only son. I asked what she wanted me to say. She said she loves him but asked if he needed to know. I told her that it is her decision to make, and she said “khalas” again. He looked at us and said that he did not understand. He looked at me for an answer, but it was clear she did not want me to disclose this to her son. We respected her decision, and requested that her son leave the room.

Her son kept repeating that he had not spoken to his mother in twenty years and wanted to know more. Her son was on the verge of tears and was seeking some form of validation from us that we could not offer him. My attending physician reiterated to him that we could not disclose confidential patient information without her consent. Her son left the room realizing that our trust worked both ways, and I wondered how he felt now that the confidentiality situations were reversed.

My attending physician recommended a neurology referral and sent me to fetch the social worker because they were uninsured. The social worker had left for the day so there was not much that we could do right then and there. Our patient saw our frustration, and told us not to worry. She did not understand what we were saying, but I could tell she probably had similar issues in Egypt to get her medications. Despite her poor prognosis, she had abandoned her former life and traveled around the world to be with her son. She believed that revealing the truth would only put a strain on their relationship, and she was not ready for that. We validated her concern as being her decision to make and one that we would respect. We opened the door for her son. They thanked us and left.

- ▶ **Hytham Rashid** is a fourth-year medical student and bioengineer, finishing his joint D.O./MPH program. He hopes to help refugee families like his own survive the horrors of war.

**ARTIST STATEMENT:** THIS SHORT NARRATIVE HOPES TO PROVIDE A PERSPECTIVE ON WHY CHILDREN AND PARENTS STRUGGLE TO DISCUSS THEIR HEALTH, OFTEN MASKING THEIR SHAME WITH MODESTY.